

Officeholder, Candidate,
and Controlled Committee
Campaign Statement — Long Form

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

- ☐ Pre-election Statement
☐ Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)
☐ Special Odd-Year Campaign Report
☐ Semi-annual Statement
☒ Termination Statement (Attach a completed Form 415 to this statement.)

Type or print in ink.

Statement covers period

from 7/1/95
through 2/2/96

Date Stamp

RECEIVED

Date of election if applicable:
(Month, Day, Year)

7-2 PM 4:50

COVER PAGE FORM

CALIFORNIA 595 FORM 490

Page 1 of 2

For Official Use Only

I Officeholder, Candidate, and Controlled Committee
Included in this Statement

NAME OF OFFICEHOLDER OR CANDIDATE

Bob W. FISHER

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

418 N Fairmont

RESIDENTIAL OR BUSINESS ADDRESS

LODI

(NO. AND STREET)

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

CA 95240 2093343927

Committee to Elect Bob FISHER

COMMITTEE NAME

418 N Fairmont

COMMITTEE ADDRESS

(NO. AND STREET)

LODI

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

CA 95240 2093343927

Robert W. FISHER

NAME OF TREASURER

418 N Fairmont

PERMANENT ADDRESS OF TREASURER

(NO. AND STREET)

LODI

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

CA 95240 2093343927

II Other Committees Not Included in this Statement: List any other
committees not included in this consolidated statement that are controlled by you and any
committees of which you have knowledge that are primarily formed to receive contributions
or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS

(NO. AND STREET)

CITY

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS

(NO. AND STREET)

CITY

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE

Attach additional information on appropriately labeled continuation sheets.

III Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 2/2/96 At LODI CA

DATE

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

5 SUMMARY PAGE

Statement covers period from <u>7/1/95</u> through <u>4/2/96</u>	CALIFORNIA 1994 FORM 490
Page <u>2</u> of <u>2</u>	
I.D. NUMBER <u>922915</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Committee to Elect Bob FISHER

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A & B)
1. Monetary Contributions	Schedule A, Line 3	\$ <u>0</u>	\$ <u>1203.86</u>	\$ <u>1203.86</u>
2. Loans Received	Schedule B, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ <u>0</u>	\$ <u>1203.86</u>	\$ <u>1203.86</u>
4. Non-monetary Contributions	Schedule C, Line 3	\$ <u>0</u>	\$ <u>95.00</u>	\$ <u>95.00</u>
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises)	Add Lines 3 + 4	\$ <u>0</u>	\$ <u>1298.86</u>	\$ <u>1298.86</u>
6. Enforceable Promises (Exclude Loan Guarantees, Line 18 below)	Schedule D, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
7. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 5 + 6	\$ <u>0</u>	\$ <u>1298.86</u>	\$ <u>1298.86</u>

Expenditures Made

8. Cash Payments (Other than Loans Made)	Schedule E, Line 5	\$ <u>0</u>	\$ <u>1198.86</u>	\$ <u>1198.86</u>
9. Loans Made	Schedule H, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
10. SUBTOTAL CASH PAYMENTS	Add Lines 8 + 9	\$ <u>0</u>	\$ <u>1198.86</u>	\$ <u>1198.86</u>
11. Accrued Expenses (Unpaid Bills)	Schedule F, Line 5	\$ <u>0</u>	\$ <u>917.58</u>	\$ <u>917.58</u>
12. TOTAL EXPENDITURES MADE	Add Lines 10 + 11	\$ <u>0</u>	\$ <u>2116.44</u>	\$ <u>2116.44</u>

Current Cash Statement

13. Beginning Cash Balance	Previous Summary Page, Line 17	\$ <u>5.60</u>
14. Cash Receipts	Column A, Line 3 above	
15. Miscellaneous Increases to Cash	Schedule I, Line 4	
16. Cash Payments	Column A, Line 10 above	
17. ENDING CASH BALANCE	Add Lines 13 + 14 + 15, then subtract Line 16	\$ <u>5.60</u>
If this is a termination statement, Line 17 must be zero.		

* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

Summary for Candidates in Both June and November Elections

18. LOAN GUARANTEES RECEIVED	Schedule B, Part I, Column (b)	\$ <u>0</u>
19. Cash Equivalents	See instructions on reverse	\$ <u>0</u>
20. Outstanding Debts	Add Line 2 + Line 11 in Column C above	\$ <u>917.58</u>

	1/1 through 6/30	7/1 to Date
21. Contributions Received	\$ <u>0</u>	\$ <u>0</u>
22. Expenditures Made	\$ <u>0</u>	\$ <u>0</u>

Being donated to Boys + Girl Scouts
ENDING CASH BALANCE SHOULD NOT BE A NEGATIVE AMOUNT